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7590

09/19/2005

Patent Legal Staff
 Eastman Kodak Company
 343 State Street
 Rochester, NY 14650-2201

12/20/2005 HDEHES2 00000048 09742956

01 FC:1501 1400.00 OP
 02 FC:1504 300.00 OP

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<i>June P. Carfagna</i>	(Depositor's name)
<i>June P. Carfagna</i>	(Signature)
<i>December 14, 2005</i>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/742,956	12/20/2000	Robert L. Baldino	78990D <i>RRS</i>	8705

TITLE OF INVENTION: METHOD AND APPARATUS FOR PRODUCING DIGITAL IMAGES WITH EMBEDDED IMAGE CAPTURE LOCATION ICONS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	12/19/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
SAX, STEVEN PAUL	2174	715-853000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☒ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. **Use of a Customer Number is required.**

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 *David M. Woods*

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

EASTMAN KODAK COMPANY

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

343 STATE STREET, ROCHESTER, NY 14650-2201Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☐ Advance Order - # of Copies _____

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- ☐ A check in the amount of the fee(s) is enclosed.
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- ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Mark G. Bocchetti

Date

12-12-05

Typed or printed name

Mark G. Bocchetti

Registration No.

31.330

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